Parks and Recreation

3500 South Rural Road, Tempe, AZ 85282



Fee:

\$50

City of Tempe "All City" 2004 Summer Youth Basketball Program

For Girls & Boys Grades 4-8

3	This program is conducted under a philosophy of participation, skill development, good sportsmanship, friendly competition, and
	fun. Focus is on recreational competition. Each player is guaranteed to play half of the game.

The City of Tempe encourages parents to get involved with their children through the unique experience of coaching. Instructional materials/supplies and National Youth Sports Coaches Association certified training are provided to coaches to aid them in teaching and developing their players skills.

Games begin the week of Jun. 2nd and continue for seven weeks. Games are played on weeknights (Mon-Thurs) for all teams at Tempe middle schools based on gym availability. Practices are held at local schools (generally on the outdoor playground courts) during the week and are schedule at the convenience of the volunteer coach. Teams are formed according to local school boundaries.

League Categories

Girls 4th/5th League – **BASK 4C** Boys 4th/5th Grade League -BASK 3C Boys 6th Grade League - **BASK 5C** Boys 7th & 8th Grade League - **BASK 7C** Girls 6th Grade League - **BASK 6C** Girls 7th & 8th Grade League - **BASK 8C**

Easy to Register! Mail-In or Drop Off Monday-Friday, 8 AM-5 PM (**Deadline: May 20th**) FAX: 480-350-5278 (Debit or Credit only)

ON-LINE: www.tempe.gov/pkrec/ (Debit or Credit only)

FEE ASSISTANCE AVAILABLE

"All City" Summ	er Basketb	all Regist	ration For		Summ	er 2004		
Participant Name:		Gender	Age	Grade	School			
Address:			APT#	City	Zi	p		
Phone: Eve	Day		Additional		Date of birth			
Parents Name(s) Please Circle one: BASK3C	BASK 4C		I wo BASK 6C f Liability		my child's team: BASK 8C	YES / NO		
With knowledge and appreciation of the risk of injury, I wish to participate in this Activity. I agree to assume the risk of personal injury while participating. I understand the City of Tempe does not carry accident, sickness, or medical insurance for participants. I understand that all reasonable efforts will be extended to insure my health and safety. If the Class/Activity includes any physical exertion, I agree to perform the exercise at my own ability level. I fully understand the nature of this Class/Activity, and I waive and release and hold harmless the City of Tempe and any of its agents, employees, officers, council members, and sponsors for damages or costs I may have against the City of Tempe, its agents, employees, officers, council members, and sponsors for personal injury, death, or property damage suffered by me, or that I may cause to others, as a result of my participation in this Class/Activity. I agree to look to my private physician for medical advice and care and to notify my teacher or instructor of any physical limitations I might have or modifications I might need to the Class/Activity. I will require the following accommodation to participate: I have read and clearly understand the above statements. I realize this is a contract between myself and the City of Tempe and is a release of Liability. I sign it of my own free will.								
REQUIRED: Parent or Lega						D 4		
Fee: \$ Enclosed Check # Fempe Parks and Recreat	OR Signa	ture Authorizin	mber g Charge to abov TDD: 480-350	e number	_			